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TITLE: A Community Hospital Partners with Local High Schools in a Peer AIDS Prevention Program

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ISSUE: Many HIV prevention programs take advantage of the developmental stage of adolescence that encourages peer-to-peer learning in the hope of affecting or changing behavior. Few of these programs, however, have established direct community partnerships with local high schools, teachers, parents and district administrations, to support highly trained peers guided by similarly trained teacher liaisons within the classroom of community.

SETTING: In 1993, North Shore University Hospital (NSUH) joined with 4 high schools (Nassau County, Long Island) to develop a Peer AIDS Education Program after conducting focus groups with diverse teens, teachers and PTA parents. The Pilot Program (2/94) consisted of a 2day intensive hospital-based training program for specially selected students and teachers.

PROJECT: The NSUH Peer AIDS Education Program completed 10 training cycles, training 835 teens and 65 teachers from 37 high schools and 1 junior college in Nassau, Suffolk, and Queens counties. Schools request training, which is provided at no cost. Training takes place on two full Saturdays. Among the general sessions are AIDS 101, (biology/transmission) and "Living with HIV/AIDS," where young adult PWA's share their stories and meet the students. Students attend four 1½hour interactive skill building workshops. Teachers attend parallel workshops and explore models of successful educational activities and means of providing motivation and support after training. Teachers and teens then brainstorm their goals and objectives for their home school programs. Ideas are shared, a process evaluation is conducted and Peer Educator Certificates are awarded.

RESULTS: When teens are supported by their parents, teachers, schools and a hospital-based program, they can be depended upon to be responsible, concerned disseminators of information. Serving as opinion leaders, they affect social norms while attracting other students to join the club; most schools seek retraining to replace graduating peers. Our program has grown through referral and request, as teens and parents from one community discuss the concept with those in neighboring communities. The peers have conducted interactive programs in their high schools and in their district elementary and middle schools. They have presented community programs attracting from 100-500 teens and adults, have raised funds to support AIDS charities, and some have gone on to join or begin AIDS prevention programs in their colleges. The teens have directly reached thousands of people with their message of prevention and compassion.

LESSONS LEARNED: We have reviewed more than 800 process evaluations, which resulted in many programmatic changes. Acknowledging the fact that increasing the level of information and awareness does not necessarily result in a change of behavior, we are currently conducting an outcome evaluation. Cooperative programs must continue to support each other in order to provide a vehicle for feedback to update information, and to share ideas regarding programming that works in a particular cultural environment. Teacher liaisons require the support of the sponsoring and agency and their school administration to continue to provide guidance and motivation to peer educators as they grow and establish themselves within the community.

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